

503 571

4-
02/07/01
28/11
requester
M. H. H. H.

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		20	5/11
FORMALITY REVIEW	11/11	525	02/07/01
RESPONSE FORMALITY REVIEW	mm	780	5-22-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here